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## UTILITY PATENT APPLICATION TRANSMITTAL

Attorn	ey Docket No.	PA000002	*
First li	nventor	Chikazawa,	Yoshiharı
Title	See Abov	/e*	

(Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Express Mail Label No.   EL67542206505	
APPLICATION ELEMENTS		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application	
See MPEP chapter 600 concerning utility patent application contents.		Washington, DC 20231	
Fee Transmittal Form (e.g., PTO/SB/17)  (Submit an original and a duplicate for fee processing)  Applicant claims small entity status.  See 37 CFR 1.27.  Specification  - Descriptive title of the invention  - Cross Reference to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention  - Brief Description  - Claim(s)  - Abstract of the Disclosure  7.		7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies	
4. X Drawing(s) (35 U		Information Dicalogues   Expl Conies of IDS	
5. Oath or Declaration	[ Total Pages 1 ]	Statement (IDS)/F 10-1449	
	uted (original or copy)	13. X Preliminary Amendment	
	prior application (37 CFR 1.63 (d)) tion/divisional with Box 18 completed)	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
	ION OF INVENTOR(S)	15. X Certified Copy of Priority Document(s) (if foreign priority is claimed)	
	tement attached deleting inventor(s) he prior application, see 37 CFR	16. Request and Certification under 35 U.S.C. 122	
	and 1.33(b).	(b)(2)(B)(i). Applicant must attach form PTO/SB/35	
6. Application Data	or its equivalent.  Application Data Sheet. See 37 CFR 1.76  17. Other:		
		the requisite information below and in a preliminary amendment,	
or in an Application Data She			
Continuation	Divisional Continuation-in-part (CIP)	of prior application No.:/	
Prior application information:  For CONTINUATION OR DIVISI	ExaminerONAL APPS only: The entire disclosure of the s	Group Art Unit:	
Box 5b, is considered a part of	the disclosure of the accompanying continuat	ion or divisional application and is hereby incorporated by reference.	
The incorporation can only be	19. CORRESPONDEN	ntly omitted from the submitted application parts.	
		Man and a second	
Customer Number or Bar Co	de Label (Insert Customer No. or Attach bar of	or X Correspondence address below	
Name	Joseph S. Tripoli		
	THOMSON multimedia Licens	sing Inc.	
Address	Patent Operations, P.O. Box 5312, Two Independence Way		
City		State NJ Zip Code 08543-5312	
Country		hone (609) 734-9443 Fax (609) 734- 9700	
_Name₋(P:rint/Type)	Harvey D. Hill	Registration_No(Attorney/Agent) 28,298	
	1 han 11/1/1/10.11		
Signature	'!	Date /-/8-0/	

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Application Number		
Filing Date	Herewith	
First Named Inventor	Yoshiharu Chikazawa	
Examiner Name		
Group Art Unit		
Attorney Docket No.	D7.000003	

METHOD OF PAYMENT	FEE CALCULATION (continued)		
The Commissioner is hereby authorized to charge indicated fees and credit any overnayments to:	3. ADDITIONAL FEES		
indicated fees and credit any overpayments to:  Deposit	Large Small Entity Entity		
Account Number 07-0832	Fee Fee Fee Fee Fee Description	Fee Paid	
Deposit Account THOMSON multimedia	105 130 205 65 Surcharge - late filing fee or oath		
Charge Any Additional Fee Required Licensing,	127 50 227 25 Surcharge - late provisional filing fee or cover sheet		
Under 37 CFR 1.16 and 1.17 Inc.  Applicant claims small entity status.	139 130 139 130 Non-English specification		
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination		
2. Payment Enclosed:	112 –920* 112 920*—Requesting publication of SIR prior to Examiner action		
Check Card Order Other	113 1,840°. 113 1,840° Requesting publication of SIR after Examiner action		
FEE CALCULATION	115 110 215 55 Extension for reply within first month		
1. BASIC FILING FEE	116 390 216 195 Extension for reply within second month		
Large Entity Small Entity Fee Fee Fee Fee Description	117 890 217 445 Extension for reply within third month		
Code (\$) Code (\$) Fee Paid	118 1,390 218 695 Extension for reply within fourth month		
101 710 201 355 Utility filing fee 7 1 0 0	128 1,890 228 945 Extension for reply within fifth month		
108 320 206 160 Design filing fee	119 310 219 155 Notice of Appeal		
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal		
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing		
	138 1,510 138 1,510 Petition to Institute a public use proceeding		
SUBTOTAL (1) (\$) /10.0	140 110 240 55 Petition to revive - unavoidable		
2. EXTRA CLAIM FEES	141 1,240 241 620 Petition to revive - unintentional		
Extra Claims below Fee Paid	<b>7</b>		
Total Claims20** = X =	1 143 440 243 220 Design issue fee		
Claims — " — " — " — "	144 000 244 000		
Multiple Dependent	1 100 100 100 100 100 100 100 100 100		
Large Entity Small Entity	123 130 123 130 — Petitions related to provisional applications 126 180 126 180 Submission of Information Disclosure Stmt		
Fee Fee Fee Fee Description		0.00	
Code (\$) Code (\$) 103 18 203 9 Claims in excess of 20	property (times number of properties)		
102 80 202 40 Independent claims in excess of 3	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))		
104 270 204 135 Multiple dependent claim, if not paid 109 80 209 40 ** Reissue independent claims	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))		
over original patent  110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)		
and over original patent	169 900 169 900 Request for expedited examination of a design application		
SUBTOTAL (2) (\$)	Other fee (specify)		
°*or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40	.00	
SUBMITTED BY 1	Complete (# applicable)		
-Nama (Print/Type)	Registration No. 29 209 Telephone 609/73/	-9839	
Signature Harvest D. Friday	(Attorney/Agent) 28,298 Pate 1-18		

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